Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this a amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	James	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Walter	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Marsch	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	•	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal	xxx-xx-7841	
	Individual Taxpayer Identification number (ITIN)		

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Debtor 1 James Walter Marsch Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs				
5.	Where you live	2811 Illinois Avenue	If Debtor 2 lives at a different address:				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Baltimore					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Your Bankruptcy Case  Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapt	ter 7						
		☐ Chapt	ter 11						
		☐ Chapt	ter 12						
		☐ Chapt	ter 13						
8.	How you will pay the fee	abo ord	out how yo	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	with the clerk's office in your local court for urself, you may pay with cash, cashier's che lf, your attorney may pay with a credit card	eck, or money		
						option, sign and attach the Application for Individuals to Pay			
			-	,	Official Form 103A).  ed (You may request this option	only if you are filing for Chapter 7. By law,	a iudge mav.		
		but apr	is not rec olies to yo	uired to, waive you ur family size and	ur fee, and may do so only if you you are unable to pay the fee in	installments). If you choose this option, you ial Form 103B) and file it with your petition.	overty line that		
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to	line 12.					
		☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	you and do you want to stay in your reside	nce?		
				No. Go to line 12					
				Yes. Fill out <i>Initia</i> bankruptcy petition		ludgment Against You (Form 101A) and file	it with this		

Debtor 1 James Walter Marsch

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Deb	otor 1 James Walter Mai	rsch			Case number (if known)		
Dor	12. Donort About Any Bu		Va 0	a aa a Sala Drami'a			
Par	Report About Any Bu	isinesses	Tou Owi	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		ПYes	Name	e and location of bus	siness		
	A sole proprietorship is a	<b>—</b> 100.					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Report About Any Businesses You Own as a Sole Proprietor re you a sole proprietor rany full- or part-time usiness?  No. Go to Part 4.  Yes. Name and location of business  Name of business, if any  Name of business  I any  Name of busin					
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
	·				· · · · · · · · · · · · · · · · · · ·		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadlines operation in 11 U.S	s. If you in ns, cash-f S.C. 1116 I am	ndicate that you are low statement, and f (1)(B). not filing under Chap filing under Chapter	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure oter 11.  11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No					
	property that poses or is alleged to pose a threat of imminent and	_	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?						
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?			
	- •				Number, Street, City, State & Zip Code		

Debtor 1 James Walter Marsch

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 James Walter Mar	Sch Case number (if known)						
Part	t6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a p	y consumer debts? Consumer debts are depersonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
	16b.			y business debts? Business debts are debinvestment or through the operation of the b				
			□ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.		ou owe that are not consumer debts or busin	ness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	pter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
18.	administrative expenses		■ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000			
у	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	□ 50,001-100,000			
	owe?	□ 100-1		<b>1</b> 0,001-25,000	☐ More than100,000			
		□ 200-9	99					
19.	How much do you	□ \$0 - \$		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,001 - \$500 million	I More than \$50 minon			
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	<b>□</b> \$50,0	001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
		_	001 - \$500,000	\$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion			
		<b>□</b> \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have ex	camined this petition, and I	declare under penalty of perjury that the inf	formation provided is true and correct.			
				er 7, I am aware that I may proceed, if eligible he relief available under each chapter, and I	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
			o attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this cument, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the	he chapter of title 11, United States Code, s	specified in this petition.			
		bankrupt and 357	cy case can result in fines	ent, concealing property, or obtaining mone up to \$250,000, or imprisonment for up to 2	by or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			es Walter Marsch Walter Marsch	Signature of Del	htor 2			
			e of Debtor 1	Signature of Del	<u>-</u>			
		Executed	d on July 28, 2016	Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

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Debtor 1	James Walter Marsch	Case number (if known)	
----------	---------------------	------------------------	--

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael Signature of	Coyle Attorney for Debtor	_ Date	July 28, 2016 MM / DD / YYYY
Michael Co	pyle		
The Coyle	Law Group LLC		
6700 Alexa Suite 200	ander Bell Drive		
Columbia,	MD 21046		
Number, Street,	City, State & ZIP Code		
Contact phone	410-884-3180	Email address	mcoyle@thecoylelawgroup.com
16202			
Bar number & St	ate		

## Case 16-20067 Doc 1 Filed 07/28/16 Page 8 of 42

Fill	in this inform	ation to identify your	case:			
	otor 1	James Walter Ma				
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	DISTRICT OF MARYLAND			
	se number				☐ Chec	ck if this is an
						nded filing
Of	ficial For	m 106Sum				
Su	mmary of	Your Assets	and Liabilities and	Certain Statistical Information		12/15
info	rmation. Fill o	ut all of your schedul	es first; then complete the in	filing together, both are equally responsible formation on this form. If you are filing amend box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						assets of what you own
1.	Schedule A/ 1a. Copy line	<b>B: Property</b> (Official Fo	orm 106A/B) rom Schedule A/B		\$	184,708.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	1,100.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	185,808.00
Par	t 2: Summa	rize Your Liabilities				
					Your	liabilities
						nt you owe
2.			laims Secured by Property (Off mn A, <i>Amount of claim,</i> at the I	ficial Form 106D) cottom of the last page of Part 1 of Schedule D	\$	158,125.00
3.			Unsecured Claims (Official For 1 (priority unsecured claims) fr	rm 106E/F) om line 6e of <i>Schedule E/F.</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured claim	s) from line 6j of Schedule E/F	\$	1,002.00
				Your total liabilities	\$	159,127.00
Par	t 3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Formbined monthly incom			\$	2,600.00
5.		Your Expenses (Official onthly expenses from li			\$	3,325.00
Par	t 4: Answer	These Questions for	Administrative and Statistic	al Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. Check	this box and submit this form to the court with yo	our other so	chedules.
7.	Yes What kind of	f debt do you have?				
				s are those "incurred by an individual primarily for r statistical purposes. 28 U.S.C. § 159.	a persona	ıl, family, or
		ebts are not primarily t with your other sched		othing to report on this part of the form. Check this	s <i>box</i> and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 James Walter Marsch

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,956.66

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clai	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

						Filed U		age 10 0	_	
Fill in	n this information	on to identify yo	our case and th	nis filinç	g:					
Debt		ames Walter	Marsch							
Debt		irst Name	Middle	Name		Last Nan	ie			
		irst Name	Middle	Name		Last Nan	ie			
Unite	ed States Bankru	ptcy Court for th	e: DISTRICT	OF MA	RYLAND					
Case	number									☐ Check if this is an amended filing
∩ffi	icial Form	106 \ /P								
_	hedule /	_	perty							12/15
think i inform	t fits best. Be as	complete and acc	curate as possible	e. If two	married pe	eople are filin	g together, both a	are equally resp	oonsible for su	the category where you pplying correct e number (if known).
Part 1	Describe Each	Residence, Buil	ding, Land, or Otl	her Real	Estate Yo	u Own or Hav	e an Interest In			
	you own or have a No. Go to Part 2.  Yes. Where is the		able interest in a	iny resid	lence, build	ding, land, or	similar property?			
_	2911 Illinois A		Man	What		perty? Check a	ll that apply			aims or exemptions. Put
	Street address, if available, or other description			Duplex or multi-unit building Condominium or cooperative					d claims on Schedule D: ms Secured by Property.	
	Halethorpe	MD :	21227-0000	☐ Manufactured or ☐ Land		ured or mobile	nobile home		alue of the	Current value of the
_	City	State	ZIP Code		!	nt property		entire pro \$1	84,708.00	portion you own? \$184,708.00
						е				our ownership interest ancy by the entireties, or
				Who	has an inte	erest in the p	operty? Check one	à life esta	te), if known.	
	Baltimore					-		Tenants	s by Entiret	у
_	County				Debtor 1	and Debtor 2	only ors and another		k if this is con	nmunity property
					r information		o add about this	(	,	
	add the dollar va					ies from Paı	t 1, including a	ny entries fo	r	\$184,708.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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De	ebtor 1 James Walter Marsch		Case number (if known)	
3. (	Cars, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
	□No			
ı	Yes			
	1 Make Buick		Do not deduct sec	cured claims or exemptions. Put
3.	.1 Make: Buick  Model: LeSabre	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Year: 1989	■ Debtor 1 only □ Debtor 2 only		
	Approximate mileage: 1,144,000	Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another		
			\$500	0.00 \$500.00
		☐ Check if this is community property (see instructions)		<del>5.00</del> <del>\$500.00</del>
<b>■</b> □	■ No □ Yes  Add the dollar value of the portion you ov	atercraft, fishing vessels, snowmobiles, motorcy	ng any entries for	¢500.00
	pages you have attached for Part 2. Write	that number here	=>	\$500.00
Pai	rt 3: Describe Your Personal and Household I	tems		
Do	you own or have any legal or equitable in	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Household goods and furnishings  Examples: Major appliances, furniture, linens  □ No  ■ Yes. Describe	s, china, kitchenware		
	3 TVs, Dining r	oom set, furniture set, kitchen set, bedr	oom set	\$500.00
	Electronico			
	Electronics  Examples: Televisions and radios; audio, vic including cell phones, cameras, r  ■ No	leo, stereo, and digital equipment; computers, p media players, games	rinters, scanners; music c	ollections; electronic devices
	Yes. Describe			
	Collectibles of value  Examples: Antiques and figurines; paintings, other collections, memorabilia, or	prints, or other artwork; books, pictures, or othe	er art objects; stamp, coin	, or baseball card collections;
	■ No □ Yes. Describe			
	musical instruments	nd other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes	and kayaks; carpentry tools;
	■ No □ Yes. Describe			
10.	Firearms  Examples: Pistols, rifles, shotguns, ammun  ■ No	ition, and related equipment		
	Yes. Describe			

Official Form 106A/B Schedule A/B: Property page 2

## Case 16-20067 Doc 1 Filed 07/28/16 Page 12 of 42

Debtor 1	James Walter M	larsch	Cas	se number (if known)	
☐ No		es, furs, leather coats, desi	gner wear, shoes, accessories		
. 00	_	asual clothes			\$100.00
■ No		ry, costume jewelry, engag	ement rings, wedding rings, heirloom jewelr	ry, watches, gems, gold,	silver
-	arm animals nples: Dogs, cats, bird	s, horses			
☐ Yes	. Describe				
■ No	other personal and h	·	oot already list, including any health aids	s you did not list	
			ort 3, including any entries for pages you	have attached	\$600.00
Part 4: D	escribe Your Financial	Assets			
Do you o	wn or have any lega	l or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		e in your wallet, in your ho	me, in a safe deposit box, and on hand whe	en you file your petition	
Exan			unts; certificates of deposit; shares in credit with the same institution, list each.	unions, brokerage house	es, and other similar
□ No ■ Yes	i		Institution name:		
		17.1. Checking	Bank of America negative \$19.00 balance		\$0.00
<i>Exan</i> ■ No		publicly traded stocks estment accounts with brok Institution or issuer n	kerage firms, money market accounts ame:		
19. Non-p		and interests in incorpo	rated and unincorporated businesses, ir	ncluding an interest in a	an LLC, partnership, and
■ No □ Yes	s. Give specific inform	ation about themName of entity:		of ownership:	
Nego Non-l	otiable instruments inc	lude personal checks, cash	iable and non-negotiable instruments niers' checks, promissory notes, and money nsfer to someone by signing or delivering th		
■ No □ Yes	. Give specific informa	ation about them Issuer name:			

Official Form 106A/B Schedule A/B: Property page 3

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De	ebtor 1	James Wa	Iter Marsch		Case number (if known)	
21.		nent or pension les: Interests in	<b>on accounts</b> n IRA, ERISA, Keogh, 401(k), 403(b	), thrift savings accounts, or other p	pension or profit-sharing plans	;
	☐ Yes. I	_ist each acco	unt separately. Type of account:	Institution name:		
22.	Your sh	nare of all unus	d prepayments sed deposits you have made so that its with landlords, prepaid rent, publi			or others
				Institution name or individual:		
23.	Annuiti	es (A contract	for a periodic payment of money to	you, either for life or for a number o	of years)	
	☐ Yes		Issuer name and description.			
24.			tion IRA, in an account in a qualif ), 529A(b), and 529(b)(1).	ed ABLE program, or under a qu	alified state tuition progran	n.
	■ No □ Yes		Institution name and description. Se	parately file the records of any inter	rests.11 U.S.C. § 521(c):	
	■ No	-	future interests in property (other nformation about them	than anything listed in line 1), an	d rights or powers exercisa	able for your benefit
		•	trademarks, trade secrets, and ot	her intellectual property		
			omain names, websites, proceeds fr		ents	
	☐ Yes.	Give specific i	nformation about them			
27.			s, and other general intangibles ermits, exclusive licenses, cooperati	ve association holdings, liquor licer	nses, professional licenses	
	☐ Yes.	Give specific i	nformation about them			
M	oney or p	property owed	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to	you			
	■ No □ Yes. 0	Give specific ir	nformation about them, including wh	ether you already filed the returns a	and the tax years	
29.	_ ′		or lump sum alimony, spousal suppo	rt, child support, maintenance, divo	orce settlement, property settle	ement
	■ No □ Yes. 0	Give specific ir	nformation			
30.		<i>les:</i> Unpaid wa	eone owes you ages, disability insurance payments, unpaid loans you made to someone		on pay, workers' compensation	on, Social Security
	_	Give specific i	nformation			
31.		ts in insuranc les: Health, dis	e policies sability, or life insurance; health savi	ngs account (HSA); credit, homeow	ner's, or renter's insurance	
		Name the insu	rance company of each policy and li Company name:	st its value. Beneficia	ary:	Surrender or refund

Official Form 106A/B Schedule A/B: Property page 4

Deb	tor 1	James Walter Marsch	Case number (if known)	
	If you a someo	erest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a li ne has died.		eive property because
	Yes.	Give specific information		
_		against third parties, whether or not you have filed a law les: Accidents, employment disputes, insurance claims, or r		
	Yes.	Describe each claim		
34.	Other o	ontingent and unliquidated claims of every nature, inclu	uding counterclaims of the debtor and rights to	o set off claims
	■ No □ Yes.	Describe each claim		
35	Δnv fin	ancial assets you did not already list		
_	No No	ancial assets you did not alleady list		
		Give specific information		
36.		he dollar value of all of your entries from Part 4, includir rt 4. Write that number here		\$0.00
Part	5: De:	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real estate in Part 1.	
37 F	)o vou c	own or have any legal or equitable interest in any business-relat	ed property?	
_		to Part 6.		
	Yes. G	o to line 38.		
	_			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interest In.	
	_			
46. I		own or have any legal or equitable interest in any farm- Go to Part 7.	or commercial fishing-related property?	
	_	Go to line 47.		
	☐ Yes.	Go to line 47.		
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above	
53. I	Do you Examp	have other property of any kind you did not already list les: Season tickets, country club membership	?	
	No			
	Yes.	Give specific information		
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here	\$0.00
Part	8:	List the Totals of Each Part of this Form		
55.		: Total real estate, line 2		\$184,708.00
56.		: Total vehicles, line 5	\$500.00	
57. 58.		: Total personal and household items, line 15 : Total financial assets, line 36	\$600.00 \$0.00	
59.		: Total husiness-related property, line 45	\$0.00	
60.		: Total farm- and fishing-related property, line 52	\$0.00	
61.		: Total other property not listed, line 54 +	\$0.00	
62.		personal property. Add lines 56 through 61	\$1,100.00 Copy personal property	total <b>\$1,100.00</b>
			<u> </u>	Ψ1,100.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62		\$185,808.00

\$185,808.00

page 5

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Debtor 1	James Walter Ma	rsch		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND	)	
Case number				
(if known)				☐ Check if this is an amended filing

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	Check one only	, even if your	spouse is filing with y	ou.
----	--	----------------	----------------	-------------------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Chec	k only one box for each exemption.		
2911 Illinois Aveue Halethorpe, MD 21227 Baltimore County	\$184,708.00	•	\$26,583.00	11 USC § 522(b)(3)(B) and/o	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	(Bankr. D. Md. 1984) All/any equity is exempt, but as to non-joint creditors only	
1989 Buick LeSabre 1,144,000 miles Line from Schedule A/B: 3.1	\$500.00	•	\$500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Ellie Holli Gonedale A. B. G. I			100% of fair market value, up to any applicable statutory limit		
3 TVs, Dining room set, furniture set, kitchen set, bedroom set	\$500.00	•	\$500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Casual clothes Line from Schedule A/B: 11.1	\$100.00	•	\$100.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
			100% of fair market value, up to any applicable statutory limit	\$ \(\lambda\)	
Checking: Bank of America negative \$19.00 balance	\$0.00	•	\$0.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	3	

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•	laiming a homestead exemption of more than \$160,375?  adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No  Yes

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Fill in this information to identify you	ur case:				
Debtor 1 James Walter M	Marsch				
First Name	Middle Name Last Nam	е	-		
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Nam	^	_		
(Spouse II, IIIIIIg) FIISt Name	Middle Name Last Nam	5			
United States Bankruptcy Court for the	: DISTRICT OF MARYLAND		_		
Casa number					
Case number			☐ Check	if this is an	
			_	ded filing	
				•	
Official Form 106D					
Schedule D: Creditors	s Who Have Claims Secu	red by Propert	:V	12/15	
	If two married people are filing together, both a out, number the entries, and attach it to this for				
number (if known).	<b>,</b>		, , ,		
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit	this form to the court with your other schedule	s. You have nothing else	to report on this form.		
■ Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
	more than an account delains list the avaditor cannot	Column A	Column B	Column C	
	more than one secured claim, list the creditor separ s a particular claim, list the other creditors in Part 2.		Value of collateral	Unsecured	
much as possible, list the claims in alphabet	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Selene Finan	Describe the property that secures the claim:	\$145,097.00	\$184,708.00	\$0.00	
Creditor's Name	2911 Illinois Aveue Halethorpe, MD				
	21227 Baltimore County				
9990 Richmond Ave Ste	As of the date you file, the claim is: Check all the				
40	apply.				
Houston, TX 77042	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	☐ An agreement you made (such as mortgage of	or secured			
Debtor 1 only	car loan)	o secureu			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	n)			
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt					
Onemad					
Opened 5/31/07					
Last Active					
Date debt was incurred 2/12/16	Last 4 digits of account number35	49			
2.2 Selene Finan	Describe the property that secures the claim:	\$13,028.00	\$184,708.00	\$0.00	
Creditor's Name	2911 Illinois Aveue Halethorpe, MD				
	21227 Baltimore County				
9990 Richmond Ave Ste 40	As of the date you file, the claim is: Check all the	lat			
40 Houston, TX 77042	apply.				
Number, Street, City, State & Zip Code	Contingent				
Hamber, Olicet, Oity, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage of	or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				

Official Form 106D

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Debtor 1 James Wa	lter Marsch		Ca	ase number (if know)
First Name	Middle Na	me Last Name		
☐ Check if this claim re	elates to a	☐ Other (including a right to offset)		
Date debt was incurred	Opened 12/23/13 Last Active 06/16	Last 4 digits of account number	8669	
	of your form, add t	olumn A on this page. Write that number he dollar value totals from all pages.	nere:	\$158,125.00 \$158,125.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	Case	10-2000 <i>1</i> D00	o i ilieu orizi	orio Tage 19	01 42	
Fill in this in	formation to identify your	case:				
Debtor 1	James Walter Mar	rech				
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	DISTRICT OF MARY	LAND			
Case numbe	r					
(if known)	• =				_ c	check if this is an
					a	mended filing
Official F	orm 106E/F					
	e E/F: Creditors W	ho Have Unse	cured Claims			12/15
	e and accurate as possible. Us			Part 2 for araditors with N	ONDDIODITY alai	
left. Attach the name and case	reditors Who Have Claims Sec Continuation Page to this page number (if known).	e. If you have no informa				
	st All of Your PRIORITY Un					
	editors have priority unsecure	d claims against you?				
_	to Part 2.					
☐ Yes.	at All of Varra NONDDIODIT	V I I management Claims				
	st All of Your NONPRIORIT		•			
	editors have nonpriority unsec					
⊔ No. Yo	u have nothing to report in this p	art. Submit this form to the	court with your other sche	dules.		
Yes.						
unsecured	your nonpriority unsecured classifications, list the creditor separately creditor holds a particular claim, li	for each claim. For each	claim listed, identify what t	type of claim it is. Do not list	t claims already inc	cluded in Part 1. If more
						Total claim
4.1 <b>Am</b> o	ca	Last 4 dig	gits of account number	8260		\$115.00
•	riority Creditor's Name	W/ ··	- 4b - dab4 in			
==	9 S Saw Mill sford, NY 10523	wnen wa	s the debt incurred?	-		-
	per Street City State Zlp Code	As of the	date you file, the claim i	s: Check all that apply		
Who	incurred the debt? Check one.					
■ De	ebtor 1 only	☐ Contin	gent			
□ De	ebtor 2 only	☐ Unliqu	idated			
□ De	ebtor 1 and Debtor 2 only	☐ Disput	ed			
☐ At	least one of the debtors and and		IONPRIORITY unsecured	d claim:		
	heck if this claim is for a comr	•				
debt Is the	claim subject to offset?		itions arising out of a sepa priority claims	ration agreement or divorce	e that you did not	
■ No	-	•	•	g plans, and other similar c	debts	
— N				boratory Corp Of A		
<b>□</b> 16	5 <b>3</b>	Other.	Specify Med 1 02 La	Sciatory Sorp Of A	oriou	_

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Debtor	James Walter Marsch	Case number (if know)	
4.2	Equidata	Last 4 digits of account number 2606	\$289.00
	Nonpriority Creditor's Name 724 Thimble Shoals	When was the debt incurred?	
	Newport News, VA 23606		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Mercy Physician Billing S033	
4.3	Equidata	Last 4 digits of account number 1702	\$165.00
	Nonpriority Creditor's Name 724 Thimble Shoals	When was the debt incurred?	
	Newport News, VA 23606	when was the debt incurred:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Mercy Physician Billing S033	
4.4	Equidata	Last 4 digits of account number 2164	\$142.00
	Nonpriority Creditor's Name 724 Thimble Shoals	When was the debt incurred?	
	Newport News, VA 23606	Then was the dest mounted.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Med1 02 Mercy Physician Billing S033	

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ebtor	1 James Walter Marsch	Case number (if know)	
.5	Equidata Nonpriority Creditor's Name	Last 4 digits of account number 5916	\$99.00
	724 Thimble Shoals Newport News, VA 23606	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Mercy Physician Billing S033	
.6	Eguidata	Last 4 digits of account number 9707	\$98.00
	Nonpriority Creditor's Name		400.00
	724 Thimble Shoals	When was the debt incurred?	
	Newport News, VA 23606  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The control date year me, and chammer contour an anatoppy	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Mercy Physician Billing S033	
7	Equidata	Last 4 digits of account number 9425	\$94.00
	Nonpriority Creditor's Name 724 Thimble Shoals Newport News, VA 23606	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Mercy Physician Billing S033	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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### Debtor 1 James Walter Marsch

Case number (if know)

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	* —	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	* —	0.00
		,		· –	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	-			Ψ —	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
	CI-	you did not report as priority claims	6g.	\$_	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,002.00

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Fill in this infor				
Debtor 1 James Walter Marsch				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND	
Case number				
(if known)				☐ Check if this
				amended fi

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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Fill in this	information to identify you	r case:			
Debtor 1	James Walter M	arsch Middle Name	Last Name		
Debtor 2	riist name	Middle Name	Last Name		
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF MARYLA	ND		
Case numb	per				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	debtors			12/15
our name	nd number the entries in the and case number (if known you have any codebtors? (i	n). Answer every question.			p of any Additional Pages, write
_	, ,	, ,			
■ No					
☐ Yes					
	nin the last 8 years, have yo a, California, Idaho, Louisiana				ty states and territories include
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
in line Form ′	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	Δ
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	
	Number Street			_	
(	City	State	ZIP Code		
2.2				Ochadula D. P.	
3.2	Name			_ ☐ Schedule D, lin ☐ Schedule E/F,	
				☐ Schedule G, lir	
ī	Number Street			_	
(	City	State	ZIP Code		

Fill	in this information to identify your c	ase:							
De	btor 1 James Walte	er Marsch			_				
1 -	btor 2				_				
Un	ited States Bankruptcy Court for the	: DISTRICT OF MARY	LAND						
	se number		_			Check if this is	3:		
(If k	nown)					☐ An ameno			
								ing postpetition following date:	
0	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your Inc	ome							12/15
atta	puse. If you are separated and you ach a separate sheet to this form.  The describe Employment								
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed			☐ Emp	loyed		
	information about additional		■ Not employed			■ Not	employed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed to	here?						
Pa	rt 2: Give Details About Mor	nthly Income							
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any	ine, write \$0 in th	e space. Ir	nclude your nor	n-filing
	ou or your non-filing spouse have more space, attach a separate sheet to		ombine the information	on for all e	emplo	oyers for that pers	on on the	lines below. If y	you need
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	0.00	

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Deb	tor 1	James Walter Marsch	-	Case	number ( <i>if known</i> )				
				For	Debtor 1		or Debtor 2		
	Con	y line 4 here	4.	\$	0.00	nc \$	n-filing s	pouse 0.00	
	OOP	y line 4 nere	٠.	Ψ_	0.00	Ψ_		0.00	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$_		0.00	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$_		0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$_ \$	0.00	\$ \$		0.00	_
	5f.	Domestic support obligations	5f.	\$_	0.00	\$ \$		0.00	_
	5g.	Union dues	5g.	\$_	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	5h.+	- \$	0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		0.00	)
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		0.00	_ 
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				-			_
		monthly net income.	8a.	\$	0.00	\$		0.00	)
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		0.00	1
	8d.	Unemployment compensation	8d.	\$_	0.00	\$		0.00	_
	8e.	Social Security	8e.	\$	1,524.00	\$	:	566.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$		0.00	_
	8g.	Pension or retirement income	8g.	\$	510.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h.+	+ \$_	0.00	+ \$_		0.00	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,034.00	\$		566.0	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	;	2,034.00 + \$		566.00	= \$	2,600.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule code contributions from an unmarried partner, members of your household, your per friends or relatives.  International control of the contr	depen		•	•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certainies					12.	\$Combi	2,600.00
12	Do.	you expect an increase or decrease within the year after you file this form	2					month	ly income
13.		No.  Yes. Explain:	•						

Official Form 106I Schedule I: Your Income page 2

E-11	in this informati	tana ta talan ettana				ı		
FIII	in this informat	tion to identify yo	our case:					
Deb	tor 1	James Walte	r Marsch	1		Ch	eck if this is:	
D-1	t 0						An amended filir	•
	tor 2 ouse, if filing)							nowing postpetition chapter of the following date:
							·	
Unit	ed States Bankri	uptcy Court for the	: DISTRI	CT OF MARYLAND			MM / DD / YYYY	•
Cas	e number							
(If kı	nown)							
$\Box$	fficial Fo	rm 106 l				I		
			 Evnor					
		J: Your l			o filing together b	04h 040 04	واطنوه ومومونا بالوري	12/15
info	ormation. If m		eded, atta	If two married people and the change of the				
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a join	t case?						
	■ No. Go to	line 2.						
	☐ Yes. <b>Doe</b> s	s Debtor 2 live i	in a separa	ate household?				
	□ No	0						
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
2.	Do vou have	dependents?	■ No					
	Do not list De	•	_	Fill out this information for	Dependent's relati	ionshin to	Dependent's	Does dependent
	Debtor 2.	ebior i and	☐ Yes.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents i							☐ Yes
								□ No
								Yes
								□ No
								_
								□ No □ Yes
3.	Do your exp	enses include		No				_ Lifes
	expenses of	people other the people other the people of	han $_{oldsymbol{\sqcap}}$	No Yes				
Par	t 2: Estima	ate Your Ongoi	ng Monthl	y Expenses				
exp	imate your ex enses as of a dicable date.	penses as of yo date after the b	our bankru oankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the second sec	orm as a s J, check	supplement in a C the box at the top	chapter 13 case to report o of the form and fill in the
Incl	lude expense	s naid for with r	non-cash	government assistance i	f vou know			
the	value of such	assistance and		luded it on Schedule I: \			V	
(Off	ficial Form 10	6l.)					Your ex	xpenses
4.		r home owners d any rent for the		ses for your residence. I	nclude first mortgage	e 4.	\$	1,200.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	¢	0.00
		siale laxes ty, homeowner's	s, or renter	's insurance		4a. 4b.		0.00
	•	•	-	ıpkeep expenses		4c.	·	100.00
	4d. Home	owner's associat	tion or cond	dominium dues		4d.	· -	0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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ebtor 1	James W	alter Marsch	Ca	se num	ber (if known)	
. Utiliti					,	
		hoot natural gas		6a.	¢	225.00
		heat, natural gas				325.00
		er, garbage collection		6b.	·	35.00
		cell phone, Internet, satellite, and cable	services	6c.	•	346.00
	Other. Spe			6d.	·	0.00
		keeping supplies		7.	·	300.00
		nildren's education costs		8.	\$	0.00
	-	y, and dry cleaning		9.	\$	60.00
	•	oducts and services		10.	·	0.00
		tal expenses		11.	\$	0.00
		Include gas, maintenance, bus or train far r payments.	e.	12.	\$	60.00
Enter	tainment, c	lubs, recreation, newspapers, magazir	es, and books	13.	\$	0.00
		ibutions and religious donations		14.	\$	0.00
Insura		-				
		surance deducted from your pay or include	ed in lines 4 or 20.			
15a.	Life insura	nce		15a.	\$	0.00
15b.	Health insu	rance		15b.	\$	305.00
15c.	Vehicle ins	urance		15c.	\$	224.00
15d.	Other insur	ance. Specify:		15d.	\$	0.00
Taxes	s. Do not inc	clude taxes deducted from your pay or inc	luded in lines 4 or 20.	-		
Specif	fy:	ase payments:		16.	\$	0.00
		nts for Vehicle 1		17a.	\$	0.00
		nts for Vehicle 2		17b.	\$	0.00
		cify: Cra payments on Wife's vehi	cle	17c.	\$	370.00
	Other. Spe		<u></u>	17d.	·	0.00
		of alimony, maintenance, and support to our pay on line 5, Schedule I, Your Inc		- 18.	\$	0.00
		you make to support others who do no			\$	0.00
Specif		you make to support outside time us in	or not man your	19.	<u> </u>	0.00
	,	rty expenses not included in lines 4 or	5 of this form or on Schedu	_	our Income.	
		on other property		20a.		0.00
	Real estate			20b.	·	0.00
		omeowner's, or renter's insurance		20c.	·	0.00
		ce, repair, and upkeep expenses		20d.	·	0.00
		er's association or condominium dues		20a.	·	0.00
	r: Specify:	. 5 45555141611 or obligation from		21.		0.00
Care	· Opecity.			- 21.	-Ψ	0.00
	-	nonthly expenses				
	Add lines 4 t	9			\$	3,325.00
22b. C	Copy line 22	(monthly expenses for Debtor 2), if any,	from Official Form 106J-2		\$	
22c. A	Add line 22a	and 22b. The result is your monthly expe	enses.		\$	3,325.00
		, , ,			·	
	-	nonthly net income.		0.0		
		2 (your combined monthly income) from S	Schedule I.	23a.	*	2,600.00
23b.	Copy your	monthly expenses from line 22c above.		23b.	-\$	3,325.00
23c.		our monthly expenses from your monthly i	ncome.	22.	¢	-725.00
	The result	s your monthly net income.		23c.	\$	-125.00
		n increase or decrease in your expense				
		u expect to finish paying for your car loan within erms of your mortgage?	the year or do you expect your mo	ortgage p	payment to increas	se or decrease because of a
■ No	).					
☐ Ye		Explain here:				

Fill in this informa	ation to identify your	case:		
Debtor 1	James Walter Ma	rsch		
	First Name	Middle Name	Last Name	
Debtor 2	E: AN	ACT III AL		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:	DISTRICT OF MARYLAND		
Case number				
(if known)				☐ Check if this is an amended filing
Official Form <b>Declaration</b>	-	ın Individual De	ebtor's Schedul	<b>es</b> 12/15
If two married peo	ple are filing together	, both are equally responsible	for supplying correct informate	tion.
obtaining money o	or property by fraud in U.S.C. §§ 152, 1341, 1	n connection with a bankrupto		alse statement, concealing property, or \$250,000, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy fo	orms?
■ No				
☐ Yes. Na	me of person			ach Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119)
	of perjury, I declare rue and correct.	that I have read the summary	and schedules filed with this d	eclaration and
X /s/ Jame	s Walter Marsch		X	
James W	Valter Marsch of Debtor 1		Signature of Debtor 2	
Date <u>Ju</u>	ly 28, 2016		Date	

	l in this inform	ation to identify you	r case:						
De	ebtor 1	James Walter M		iddle Name		Last Name			
1 -	ebtor 2 ouse if, filing)	First Name	Mi	ddle Name		Last Name			
Un	ited States Ban	kruptcy Court for the:	DISTR	ICT OF MARYLA	ND				
1	nse number							_	heck if this is an mended filing
St	as complete ar	of Financial	ible. If two	married people	are filii	s Filing for B	equally respons	sible for sup	
		ore space is needed, ). Answer every que		separate sheet to	this fo	orm. On the top of an	y additional page	es, write you	ir name and case
Pa	rt 1: Give De	etails About Your Ma	arital Statu	ıs and Where Yo	u Lived	l Before			
1.	What is your	current marital statu	ıs?						
	<ul><li>■ Married</li><li>□ Not marr</li></ul>	ied							
2.	During the la	st 3 years, have you	lived any	where other thar	n where	you live now?			
	■ No □ Yes. List	all of the places you I	ived in the	last 3 years. Do	not inclu	ide where you live nov	I.		
	Debtor 1 Pri	or Address:		Dates Debtor	1	Debtor 2 Prior Ac	ldress:		Dates Debtor 2 lived there
<b>3.</b> stat						uivalent in a commun New Mexico, Puerto R			1? (Community property isconsin.)
	■ No □ Yes. Mak	ke sure you fill out <i>Scl</i>	hedule H: `	Your Codebtors (0	Official F	Form 106H).			
Pa	rt 2 Explain	the Sources of You	r Income						
4.	Fill in the total	amount of income yo	u received	from all jobs and	all busi	usiness during this you nesses, including part ther, list it only once ur	time activities.	evious caler	ndar years?
	□ No ■ Yes. Fill	n the details.							
			Debtor 1				Debtor 2		
				of income I that apply.	(be	oss income fore deductions and lusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	■ Wage bonuses,	es, commissions, tips		\$18,377.00	☐ Wages, con bonuses, tips	nmissions,	
			☐ Opera	ating a business			☐ Operating a	business	

Official Form 107

Deptor 1	James Walte	er Marscn		Cas	e number (if known)		
			Dahtar 4	Debtor 1			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	alendar year: 1 to December	31, 2015 )	■ Wages, commissions, bonuses, tips	\$50,286.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
	alendar year be 1 to December		■ Wages, commissions, bonuses, tips	\$52,466.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
List ea		the gross inco	e and you have income that yome from each source separa	-	-		
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
	uary 1 of curre ou filed for ba		SSI Benefits	\$3,048.00			
			Pension/IRA Distribution	\$1,100.00			
Part 3:	List Certain Pa	ovments You	Made Before You Filed for	Bankruptcv			
6. Are ei	ither Debtor 1's	s or Debtor 2 ebtor 1 nor D	's debts primarily consume lebtor 2 has primarily consu personal, family, or househo	r debts? umer debts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by ar
	•	•	re you filed for bankruptcy, di	id you pay any creditor a tota	l of \$6,425* or mo	re?	
	□ <sub>No.</sub> □ <sub>Yes</sub>	Go to line 7	each creditor to whom you pa	id a total of \$6 425* or more	n one or more nav	mente and th	ne total amount you
		paid that cre not include	editor. Do not include paymer payments to an attorney for t t on 4/01/19 and every 3 year	nts for domestic support oblic his bankruptcy case.	gations, such as ch	ild support a	nd alimony. Also, do
■ Y	es. Debtor 1	or Debtor 2 o	r both have primarily consure you filed for bankruptcy, di	umer debts.			
	■ No.	Go to line 7					
	☐ Yes	List below e	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
Credi	itor's Name an	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known)

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partner r more of their voting	erships of which yog g securities; and a	ou are a general p iny managing age	artner; corporation nt, including one fo
	No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a debt	that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi Include creditor	
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
	□ No ■ Yes. Fill in the details.  Case title Case number  Ward, et al vs Marsch, et al 03C15010687	Nature of the case Foreclosure	Court or agency Circuit Court fo		Status of the company Pending On appeal	ase
			County Courts 401 Bosley Ave Towson, MD 2	enue	Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11.  □ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached, s	eized, or levied?
	Creditor Name and Address	Describe the Bronerty		Date		Value of the
	Creditor Name and Address	Describe the Property  Explain what happened	I	Date		property
11.	accounts or refuse to make a payment bec		uding a bank or fir	nancial institutio	n, set off any amo	ounts from your
	Yes. Fill in the details.  Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess			of creditors, a

Debtor 1 James Walter Marsch

Del	otor 1 James Walter Marsch	Case number	(if known)	
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person?	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	, did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contribution	ution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	or gambling?	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	Yes. Fill in the details.			
	how the loss occurred Include	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepared Include any attorneys, bankruptcy petition prepared No	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	The Coyle Law Group LLC 6700 Alexander Bell Drive Suite 200 Columbia, MD 21046	Attorney Fees	July 27, 2016	\$509.00
	mcoyle@thecoylelawgroup.com			
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of payment
			made	

Debtor 1	James.	Walter	Marech
Depioi i	Jannes	vvailei	IVIAL SCI

Case number (if known)

18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr			ny property or received or debts change	Date transfer was made
19.	<ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>					
	Name of trust	Description and v	alue of the prop	erty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No					
		Last 4 digits of account number	Type of accourant instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe deposit	box or other depos	itory for securities,
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the c	contents	Do you still have it?
22.	Have you stored property in a storage unit of	place other than your	home within 1 y	year before yo	u filed for bankrupte	cy?
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the c	contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	or Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	☐ Yes. Fill in the details.  Owner's Name  Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the p	property	Value
Par	t 10: Give Details About Environmental Info	rmation				
For	For the purpose of Part 10, the following definitions apply:					

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

Debtor 1 James Walter Marsch

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
	Site means any location, facility, or proper to own, operate, or utilize it, including disp	•	law, whether you now own, operate, o	or utilize it or used		
	Hazardous material means anything an en hazardous material, pollutant, contaminan		s waste, hazardous substance, toxic s	substance,		
Rep	port all notices, releases, and proceedings t	hat you know about, regardless of wher	n they occurred.			
24.	Has any governmental unit notified you the	at you may be liable or potentially liable	under or in violation of an environme	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit o	of any release of hazardous material?				
	■ No					
	☐ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or ad	Iministrative proceeding under any envi	ironmental law? Include settlements a	and orders.		
	■ No					
	Yes. Fill in the details.					
	Case Title	Court or agency	Nature of the case	Status of the		
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case		
Pai	rt 11: Give Details About Your Business o	r Connections to Any Business				
27.	Within 4 years before you filed for bankrup	otcy, did you own a business or have ar	ny of the following connections to any	/ business?		
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	iip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing e	xecutive of a corporation				
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation				
	No. None of the above applies. Go to	Part 12.				
	Yes. Check all that apply above and fi	ill in the details below for each business	S.			
	Business Name	Describe the nature of the business	Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security  Dates business existed	number or ITIN.		
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	otcy, did you give a financial statement	to anyone about your business? Inclu	ude all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number Street City State and 7/8 Code)	Date Issued				
	(Number, Street, City, State and ZIP Code)					

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-20067 Doc 1 Filed 07/28/16 Page 36 of 42

Debtor 1	James Walter Marsch		Case number (if known)
with a ban	nd correct. I understand that making kruptcy case can result in fines up t §§ 152, 1341, 1519, and 3571.	,	property, or obtaining money or property by fraud in connection or up to 20 years, or both.
/s/ Jame	s Walter Marsch		
	Valter Marsch e of Debtor 1	Signature of Debto	or 2
Date Ju	ıly 28, 2016	Date	
Did you at	tach additional pages to Your Stater	nent of Financial Affairs for Inc	dividuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you pa	ay or agree to pay someone who is n	ot an attorney to help you fill c	out bankruptcy forms?
■ No			

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation	
	\$245	filing fee	-
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_fo

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## United States Bankruptcy Court District of Maryland

		District of Maryland		
In re	James Walter Marsch		Case No.	
		Debtor(s)	Chapter	7
	VERII	FICATION OF CREDITOR N	MATRIX	
ie ab	ove-named Debtor hereby verifies th	at the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
ate:	July 28, 2016	/s/ James Walter Marsch		
<i>-</i>		James Walter Marsch		

Signature of Debtor

Amca 2269 S Saw Mill Elmsford, NY 10523

Equidata 724 Thimble Shoals Newport News, VA 23606

Selene Finan 9990 Richmond Ave Ste 40 Houston, TX 77042